

of providing early identification of individual recipients under 21 years of age who are in need of medical or remedial care and services:

MATERNAL AND CHILD HEALTH

- (1) Hearing and vision screening programs
- (2) Pediatric clinics
- (3) Immunization clinics
- (4) Child health conferences
- (5) Pre-natal clinics
- (6) Vital Statistics birth certificates
- (7) Consultation & evaluation clinics for mental retarded
- (8) Family Planning

M & I

- (1) Pre-natal, hospital and delivery and post-natal care

DENTAL HEALTH

- (1) Mobile dental unit for screening of Head Start students
- (2) Preschool and school screening

III. Services Offered

A. Department of Health

1. Hearing and vision screening is provided for preschool, head start, and certain grades of elementary and secondary schools in twelve counties. These clinics are held either in the school, on the State Health Department mobile unit, or in the local health department.
2. Immunization clinics are held in every county health department and other selected locations and are available to all children.

11.12 Tr. 3/12/74 Incorp 11/12/74 Effective 12/28/73

MAR 12 1974

3. Routine diagnostic screening for preventive health care is available to well children through 27 child health conferences.
4. Complete examination, prenatal care and delivery services are given to high-risk mothers through nine prenatal clinics and two maternity and infant care projects. Delivery and postnatal care is offered through the M&I projects. Prenatal clinics are held in the health departments of Barbour, Fayette, Greenbrier, Logan, Putnam, Summers, Wood and Tucker counties. M&I projects are located in Charleston at the Charleston Memorial Hospital and in Morgantown at the Monongalia County Health Department. Pediatric care is provided for babies up to one year of age delivered through the M&I projects.
5. The Division of Vital Statistics sends copies of all certificates of birth of babies born with birth defect or congenital malformation to the Division of Maternal & Child Health who in turn sends a list to Crippled Children's Services in the Department of Welfare for follow-up care.
6. Two mental retardation diagnostic clinics offer evaluation and consultation for mentally retarded children from any county in the State. These clinics are held in Charleston and Morgantown.
7. Family planning services, including education, complete examinations and contraception devices are available to all women of child bearing age in 29 counties. Eighteen more counties will open clinics in May.
8. Dental services are available in 15 county health department clinics; Mobile units; and, M&I clinics in Charleston and Morgantown.

B. Department of Welfare

The Medical Assistance Program (Title XIX) provides coverage to eligible individuals by the use of medical identification cards issued

JAN 7 1975

by the Department. Eligible individuals present their medical identification card to the appropriate medical provider who, in turn, bills the Department for services rendered. This method makes it possible for eligible persons through free choice to obtain the same quantity and quality of services available to any other sector of citizens at the time and place needed.

The West Virginia Medical Assistance Program meets the costs of essential medical care and services for recipients of financial aid in the blind, disabled, and children's programs:

- (1) Supplements Medicare for recipients of OAA which includes payment of the monthly premium for Part B coverage and supplements Medicare for needy individuals who are not recipients of financial aid through a Pharmacy Program for the Aged;
- (2) Provides eye care and other services to needy blind and visually handicapped individuals who are not recipients of financial assistance;
- (3) Provides for rehabilitation and restorative medical services to recipients with potential for employment or self help;
- (4) Provides comprehensive medical care and services for children in assistance families and in foster care with emphasis on identification of health problems, early diagnosis and treatment toward prevention of dependency in adult life;
- (5) Provides mental health services, psychotherapy, drug therapy, clinic visits, etc., for recipient adults and children;
- (6) Provides home health services, medical equipment, oxygen therapy and medical supplies for home care to prevent institutional placement of chronically ill individuals;

MAR 12 1974

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- (7) Outpatient services and treatment are emphasized to lessen the frequency and duration of more costly hospitalization by providing: physician visits, prescription drugs, diagnostic laboratory and x-ray, clinic services, transportation to medical resources, outpatient hospital services, family planning services and dental services;
- (8) Provides for the identification of health problems and plans for appropriate use of health resources for families to enable these individuals to become independent and self sufficient; and,
- (9) Provides for appropriate social services to all eligible recipients in conjunction with and related to needed medical services.

#### IV. Cooperative and Collaborative Relationship at the State Level

Liaison staff to represent the West Virginia Department of Health and the West Virginia Department of Welfare are assigned to implement and evaluate the provisions outlined in this document.

#### V. Kinds of Services Provided by Local Agencies

##### A. Department of Health

The West Virginia Department of Health (Title V Programs as administered by Divisions of Dental Health and Maternal and Child Health) provides professional consultations, information and funding to plan and implement certain preventive, diagnostic and treatment services through special programs in local health departments. These services are offered through the local departments which are partially supported by the state agency through funding, staffing, equipment and other supplies.

The State Department is responsible for establishing guidelines by which clinics are to operate. State professional staff consult with

JAN 7 1975

local staffs to interpret policies, to help implement plans, and outline additional programs.

The local health agencies are responsible for direct clinic services, tabulating and reporting certain diseases and defects to the state agency and referring patients to the appropriate local or state resource. Plans for local services, including screening and diagnostic clinics, must be approved by the state agency.

B. Department of Welfare

The West Virginia Department of Welfare is the single state agency with authority to administer the Title XIX State Plan. The plan is operative on a statewide basis through a system of area and local offices in accordance with standards for administration and assistance that are mandatory and equitable throughout the State.

The Department of Welfare provides for the continuous operation of the Title XIX Plan in all county Welfare offices by means of an operations manual, which is continuously updated to reflect current policies by means of bulletins and other written releases. Local Welfare office staff are, therefore, responsible for providing those services outlined in the Medical Manual and other written releases.

A system of examining and evaluating the operations of the Title XIX Plan in the local offices include visits by professional State staff to interpret State policies and assure they are in effect; and through reports, case reviews, and such other methods as may be found necessary. Decisions by State staff on policy or case action are binding on the local units.

MAR 12 1974

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Essentially the local Welfare office determines eligibility for medical assistance and provides for the case management and coordination of social and medical services for eligible recipients. The local office in accordance with Departmental policies and guidelines provides for the appropriate referral of those individuals who can best be served through resources available as administered by other private and public agencies.

#### VI. Arrangements for Reciprocal Referrals

The West Virginia Department of Welfare will make appropriate written referrals to the Department of Health at the local level or to the nearest Department of Health resource.

The Department of Health will direct written referrals to the Department of Welfare Area Office in the resident county of the individual being referred. Selection of cases to be referred will be based on criteria developed and contained in present manual materials as distributed to local staff by both agencies.

All referrals will include the necessary patient identification information as well as background information pertaining to the medical or social problem for which the referral is being made.

If there is question as to the appropriateness of a referral or if a referral requires State level consultation, information is to be directed to appropriate State Office staff so proper disposition of the referral can be determined by Liaison staff in both agencies.

JAN 7 1973

## VII. Arrangements for Payment or Reimbursement

The Title XIX Agency will utilize Title V Grantees in furnishing the care and services which are available under Title V plans or project and are included in the State plan for medical assistance; and include where requested by the Title V Grantee, provision for reimbursement of the cost of care and services furnished by or through the Title V Grantee to an individual eligible thereof or under the State plan for medical assistance.

## VIII. Arrangements for Exchange of Reports of Services Provided to Recipients of Medical Assistance Under Title XIX

Both agencies agree to exchange case information and medical and pertinent statistical reports as needed. Case information pertinent to the medical and remedial care of the person referred will be furnished appropriate staff of the Department of Health from Department of Welfare case records. The Department of Health will furnish information needed by the Department of Welfare for the purpose of planning for any medical, remedial or follow-up care or services.

## IX. Methods to Coordinate Plans Relating to the Recipients of Medical Assistance

The parties to this agreement agree to make staff available at the local and state level, whichever is appropriate, for the purpose of joint planning and coordination of services for Title XIX recipients. These consultations are to be held at the request of either agency at the time and place which will be most beneficial for the recipient.

## X. Plans for Joint Evaluation of Policies that Affect the Cooperative Work of the Parties

Personnel at the State level of both agencies will work together to study the characteristics of clients served jointly, services, costs, staffing, the

MAR 12 1974

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delivery of services and other areas of needed evaluation. Such evaluations will occur at the request of either agency or at least on an annual basis at a time agreed upon by representatives of each agency.

XI. Arrangements for Periodic Review of the Agreements and Joint Planning for Changes in the Agreement

This agreement may be expanded, modified or amended at any time by mutual determination of both agencies and shall be reviewed and renewed from time to time as needed.

XII. Arrangements for Continuous Liaison and Designation of Staff Responsible for Liaison Activities at State and Local Levels

Both parties agree to maintain continuous liaison by designation of staff responsible for liaison activities at state and local levels.

XIII. General Provisions

- A. All activities under this agreement will be performed in compliance with the Civil Rights Act of 1964, Title VI.
- B. Case information exchanged by each agency will be kept in confidence in accordance with the rules and regulations established by each agency and will be used only in connection with the purposes of the respective agencies and for service to the client.

JAN 7 1975



agreement becomes operative on \_\_\_\_\_

ACCEPTED AND APPROVED: Date \_\_\_\_\_

*N. H. Dyer*

N. H. Dyer, M.D., Director  
West Virginia Department of Health

ACCEPTED AND APPROVED: Date \_\_\_\_\_

*Edwin F. Flowers*

EDWIN F. FLOWERS, Commissioner  
West Virginia Department of Welfare

COOPERATIVE AGREEMENT

22-12

DEPARTMENT OF WELFARE  
AND  
DIVISION OF VOCATIONAL REHABILITATION

I. Parties

This Agreement, entered into this 28th day of May, 1982, between the West Virginia Department of Welfare, hereinafter called "Department of Welfare", and the State Board of Vocational Rehabilitation, hereinafter called "Division of Vocational Rehabilitation".

II. Purpose

The Department of Welfare and the Division of Vocational Rehabilitation strongly endorse the concept that both agencies are responsible for providing services to the physically and mentally handicapped. Further, both agencies are committed to coordinate their resources, on a state and local level, in order that they may better serve the handicapped person. In order that cooperation exists on the local level, cooperative agreements shall be developed between Area Welfare and District Vocational Rehabilitation Offices.

This Agreement is designed to (1) strengthen the working relationship between both agencies; (2) provide a mechanism in which services offered by either agency are directed towards the target population; and (3) develop formal and informal helping networks on the state and local level concerned with the needs of the handicapped person.

For purposes of this Agreement the target population is defined as any mentally or physically handicapped child or adult who may benefit directly or indirectly from services offered by both agencies. Members of the target population must meet both agencies eligibility criteria for services.

To achieve the above goals, the parties mutually agree to work toward accomplishing the following:

- A. Establishing on the state and local level a referral system that will identify potential appropriate clients who can benefit from either agency's services.
- B. Development of stronger interagency communications on the state and local level.